24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Mayday PAC	C C00562587
Check if 24-hour report 48-hour report New report Amends report filed	on Man / Dab / Yayayay
Full Name of Payee 4C Partners, LLC	Date of Public Distribution/Dissemination
	10 30 2014
Mailing Address 501 3rd St NW Ste 210	Amount
City State Zip Code	10888.15
Washington DC 20001-2770	Transaction ID : VNV0C9QBHV8 Date of Disbursement or Obligation
Purpose of Expenditure Mailing Production Costs Category/ Type	10 / 30 / 2014
Name of Federal Candidate Support Office	e Sought: X House District: 03
Walter Jones Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary ⊠ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
4C Partners, LLC	10 30 / 2014
Mailing Address 501 3rd St NW	Amount
Ste 210	
City State Zip Code Washington DC 20001-2770	5862.85 Transaction ID : VNV0C9QBHY1 Date of Disbursement or Obligation
Purpose of Expenditure Mailing Postage Costs Category/ Type	10 30 / 2014
Name of Federal Candidate Support Office	e Sought: X House District: 03
Walter Jones Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	ursement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	16751.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
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Signature	